

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Claudia R. Sanders

Mailing Address 4230 - 51st Avenue NE

City
SeattleState
WAZip Code
98105-4931FEC ID number of contributing
federal political committee.

C

Name of Employer

Washington State Hospital Association

Occupation

Sr. Vice President, Policy Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 08 / 21 / 2014

Transaction ID : 21954609

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Mr. Thomas Russell

Mailing Address 9670 SE 257 Ave

City

Damascus

State

OR

Zip Code

97089-6353

FEC ID number of contributing
federal political committee.

C

Name of Employer

Adventist Medical Center-Portland

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 08 / 19 / 2014

Transaction ID : 21954610

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Ms. Sheila Clough

Mailing Address 692 Vansant St

City

Ashland

State

OR

Zip Code

97520-1890

FEC ID number of contributing
federal political committee.

C

Name of Employer

Asante Ashland Community Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 08 / 19 / 2014

Transaction ID : 21954611

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

2250.00

TOTAL This Period (last page this line number only)..... ►